

Summary of Verification: Free and Reduced-Price Meal Applications

The verification process must be completed by **November 15, 2008**.
Complete and return this form to School Nutrition Programs by **December 15, 2008**.

School District _____ Agreement No: _____ - _____

Number of Schools Operating the Lunch/Breakfast Program _____ Enrollment _____

Check One Public Schools _____ Private Schools _____ RCCIs with day students _____

Application and Eligibility Information

<i>Report the number of <u>applications</u> and <u>students</u> approved for each eligibility type as of October 1, 2008</i>	# Students	# Approved Applications
1. Total Free Eligible (1.a. + 1.b. + 1.c.)		
1.a. Number approved as Free Eligible who are not subject to verification (i.e., directly certified, homeless or administrative)		
1.b. Number approved as Free Eligible based on case number submitted on an application (Food Stamps, TANF or FDPIR).		
1.c. Number approved as Free Eligible based on income/household size information submitted on an application (including foster children)		
2. Total Reduced-Price Eligible		
3. Total <u>applications</u> eligible for verification: (1.b + 1.c. + 2) =		

A "directly certified" household is determined eligible for free meals using data from Department of Public Health and Human Services (DPHHS) letters and food stamp reports.

Type of Verification to Use

LEAs with less than 80% during the previous year **must use** error-prone **sampling**; **LEAs with greater than 80%** response rate during the previous year **may use** random or focused sampling.

- ☐ **Error Prone:** Calculate the number to verify (3. from above): _____ x 0.03 = _____ (round-up). Select from error-prone applications (those within \$100/month of the income eligibility guidelines).
- ☐ **Random:** Calculate the number to verify (3. from above): _____ x 0.03 = _____ (round-up). Select applications randomly.
- ☐ **Focused:** Calculate the number to verify based on income eligibility (3. from above) _____ x 0.01 = _____. Select applications from those within \$100/month of the income eligibility guidelines. Calculate the number to verify based on case numbers (1.b.) _____ x 0.005 (0.05%) = _____. Select applications from those with case numbers.
- ☐ **None:** Your Local Educational Agency (LEA) is exempt from verification.

Results of Verification

<i>Report the number of <u>applications</u> and <u>students</u> verified by application type. These should not include applications listed in 1.a.</i>		Free Eligible based on FS, TANF, or FDPIR case number	Free Eligible based on income	Reduced-Price Eligible
4. Responded and No Change	# Applications			
	# Students			
5. Responded and Changed to Free	# Applications			
	# Students			
6. Responded and Changed to Reduced	# Applications			
	# Students			
7. Responded and Changed to Paid	# Applications			
	# Students			
8. Did Not Respond, Changed to Paid	# Applications			
	# Students			

Signature of School District Official _____

Date Completed (by November 15) _____

